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DUTY STATUS REPORT

Name Station:
Period from 27May51 to 23Jun51

I certify that during the above period the individual named was on duty on all regular work days; except for periods of annual and sick leave, as noted below. (Indicate "None" if no leave was taken):

None

Quarters (Check One)	Dependency (Check One)
<input checked="" type="checkbox"/> Occupied Government-owned quarters	<input checked="" type="checkbox"/> Single without dependents at post
<input type="checkbox"/> Occupied temporary lodgings	<input type="checkbox"/> Single with dependents at post
<input type="checkbox"/> Occupied permanent quarters and	<input type="checkbox"/> Married without dependents at post
<input type="checkbox"/> Form 33-22 has been furnished to	<input type="checkbox"/> Married with dependents at post
<input type="checkbox"/> Headquarters or is attached hereto.	

During the above period the individual named remained at his post on all work days, except for the following periods of temporary duty travel. During all absences from his post, the individual continued to maintain his quarters at his post, except as otherwise indicated:

<u>Date of Departure from Post</u>	<u>Points Visited</u>	<u>Date of Return to Post</u>
<u>None</u>	_____	_____
_____	_____	_____

REMARKS:

Necessary overtime, holiday work and regularly scheduled night duty is reported as follows and payment claimed accordingly:

June 2: 0800-1200, 1230-1830, & 1900-2400, June 3: 0800-1200, 1230-1830, & 1900-2400, June 16: 0800-1200, 1230-1830, & 1900-2400, June 17: 0800-1200 & 1230-1830, & 1900-2400. TOTAL HOURS OVERTIME CLAIMED

60 HoursNite Differential:

May 28, 29, 31, Jun 1: worked 1530-1730 & 1800-2400 (4 @ 6 hrs.)

24 Hours

11-15Jun51, incl: worked 1530-1730 & 1800-2400 (5 @ 6 hrs.)

30 Hours

TOTAL NITE DIFFERENTIAL

54 Hours

Note: Excess overtime was directed and authorized by VOCO in accordance with dated 18Jul50,

The foregoing statements are complete and true to the best of my knowledge and belief and are made for the purpose of substantiating or causing payments to the individual covering salary, allowances, leave, post differential, night differential, holiday and overtime pay.

Signed: _____
Chief of Station

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